UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO 1004-0135 Expires July 31, 2010

	
RESERVANT A	
B B P 1/8/nd	
日 日 日 日 日	

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

OCD Artesia

5. Lease Serial No. NMLC060528	·
1	

abandoned well. Use form 3160-3 (APD) for such proposals.			6 If Indian, Allottee of	6 If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.			7. If Unit or CA/Agre	7. If Unit or CA/Agreement, Name and/or No		
Type of Well		8. Well Name and No				
⊠ Oil Well ☐ Gas Well ☐ Other				MELROSE FEDERAL 4		
2. Name of Operator Contact: PHYLLIS A EDWARDS COG OPERATING LLC E-Mail: pedwards@conchoresources com			9 API Well No. 30-015-36405 🗸			
3a Address 550 WEST TEXAS AVENUE MIDLAND, TX 79701	SUITE 1300 Ph	Phone No (include area code 1: 432-685-4340) 10 Field and Pool, or LOCO HILLS; (Exploratory GLORIETA-YESO		
4 Location of Well (Footage, Sec., 7		11 County or Parish,	11 County or Parish, and State			
Sec 23 T17S R30É 2274FNL	ĘDDY COUNTY, NM ✓					
12. CHECK APPI	ROPRIATE BOX(ES) TO IN	DICATE NATURE OF 1	NOTICE, REPORT, OR OTHE	R DATA		
TYPE OF SUBMISSION		TYPE OF ACTION				
Notice of Intent	Acidize	☐ Deepen	Production (Start/Resume)	☐ Water Shut-Off		
-	Alter Casing	Fracture Treat	Reclamation	☐ Well Integrity		
☐ Subsequent Report	Casing Repair	☐ New Construction	Recomplete	Other		
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	☐ Temporarily Abandon	•		
	Convert to Injection	□ Plug Back	☐ Water Disposal			
The approved APD for this loc COG respectfully requests pe for the well pad.	·		·			
14 Thereby certify that the foregoing is				·		
14 Thereby certify that the foregoing is	Electronic Submission #7339	98 verified by the BLM Wel ATING LLC, sent to the C	l Information System arlsbad			
Name (Printed/Typed) PHYLLIS	A EDWARDS	Title REGUL	ATORY ANALYST			
Signature (Electronic	Submission)	Date 08/18/2	009	· · · · · · · · · · · · · · · · · · ·		
:	THIS SPACE FOR F	EDERAL OR STATE	OFFICE USE			
Approved By	on Peterson 🥻	Title		DCT - 6 200		
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the section 1001 and Title 43	uitable title to those rights in the sub uct operations thereon	Office CAR	LSBAD FIELD OFFI			
States any false, fictitious or fraudulent	statements or representations as to a	ny matter within its jurisdiction	with unity to make to any department of	agency of the Office		